

The Law Offices of Patrick J.S. Inouye

810 3rd Avenue, Suite 258
Seattle, Washington 98104
Telephone: (206) 381-3900
Facsimile: (206) 381-3999

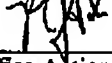
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Facsimile Transmittal

To: Examiner Carl H. Layno
Art Unit: 3762

Fax: (703) 872-9306

From: Patrick J.S. Inouye 
Response to First Office Action

Date: November 22, 2004

Re: Serial No. 10/646,244

Pages: 15 (including cover sheet)

CC:

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☐ For Review

☐ Please Comment

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Notes:

Examiner Layno:

Please find attached the following documents regarding the above-identified U.S. patent application.

- USPTO Transmittal Form
- Final Office Action Response

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Response to First Office Action
Docket No. 020.0338.US.CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

5 *In re* Application of)
 Gust H. Bardy) Group Art Unit: 3762 RECEIVED
 Serial No. 10/646,244) EXAMINER: Carl H. Layno CENTRAL FAX CENTER
 Filed: August 22, 2003) NOV 22 2004
10 For: System And Method for Determining)
 A Reference Baseline Of Regularly)
 Retrieved Patient Information For)
 Automated Remote Patient Care)

15

RESPONSE TO FIRST OFFICE ACTION

Commissioner for Patents
Alexandria, VA 22313-1450

20

Examiner Layno:

In response to the Office Action mailed on October 19, 2004, for the
above-referenced patent application, please enter the following amendments and
remarks.

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Amendments to the Claims are reflected in the listing of claims, which begins
on page 2 of this paper.

Remarks begin on page 12 of this paper.

PTO/SB/21 (04-04)

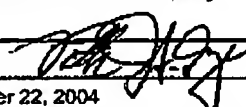
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/646,244
	Filing Date	August 22, 2003
	First Named Inventor	Bardy, Gust H.
	Art Unit	3762
	Examiner Name	Carl H. Layno
Total Number of Pages in This Submission	Attorney Docket Number	020.0338.US.CON

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Law Offices of Patrick J.S. Inoue
Signature	
Date	November 22, 2004

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Typed or printed name	Krystyna Szul		
Signature		Date	November 22, 2004

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